



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6991

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER 09/403,220 | FILING DATE 12/20/1999 RULE | CLASS 382 | GROUP ART UNIT 2625 | ATTORNEY DOCKET NO. 154/01214 |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|

APPLICANTS

RON LEVKOVITZ, RAMAT-GAN, ISRAEL; ✓
 MICHAEL ZIBULEVSKY, ALBUQUERQUE, NM;
 DIMITRY FALIKMAN, HAIFA, ISRAEL; GIDEON BERLAD, HAIFA, ISRAEL;

** CONTINUING DATA *****
 ✓ This application is a 371 of PCT/IL97/00128 04/17/1997 ✓

** FOREIGN APPLICATIONS *****

| | | | | |
|--|----------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner Signature: <i>[Signature]</i> Initials: <i>[Initials]</i> | STATE OR COUNTRY ISRAEL | SHEETS DRAWING 3 | TOTAL CLAIMS 64 | INDEPENDENT CLAIMS 5 |
|--|----------------------------|------------------------|-----------------------|----------------------------|

ADDRESS
 44909
 WOLF, BLOCK, SCHORR & SOLIS-COHEN LLP
 250 PARK AVENUE
 NEW YORK, NY
 10177

TITLE
 DIRECT TOMOGRAPHIC RECONSTRUCTION

| | | |
|------------------------------------|---|---|
| FILING FEE RECEIVED 2178 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------------|---|---|